

West Virginia Department of Transportation
Division of Motor Vehicles
Blood Draw Affidavit



TO BE COMPLETED BY THE PERSON CONDUCTING THE BLOOD DRAW, AS THE AFFIANT

Date of Blood Draw _____

Driver's Name _____

Comes now the Affiant, _____, and swears or affirms that
FULL NAME OF THE PERSON CONDUCTING THE BLOOD DRAW
the following statement is true and accurate under penalty of law:

1.) The Affiant is an employee of _____,
FACILITY NAME
and has been employed by that facility since _____;
DATE EMPLOYMENT BEGAN

2.) The Affiant is medically trained and medically authorized to draw blood pursuant to West Virginia laws, West Virginia regulations, and the procedures of the Facility for the purpose of submitting the blood for chemical analysis; and

3.) That the Driver listed above appeared at the Facility on the date listed above and the Affiant drew blood from the Driver in accordance with West Virginia laws, West Virginia regulations, and the procedures of the Facility for the purpose of submitting the Driver's blood for chemical analysis.

I understand that signing this statement constitutes an oath or affirmation that the statements above are true. I understand that willfully giving false information in this statement is false swearing and is a misdemeanor crime.

Printed Name and Title of Affiant _____

Signature of Affiant (X) _____ **Date** _____

Affiant's Work Phone Number _____

